

U.S. APPLICATION NO.

1, 5

## UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office Address: ASSISTANT COMMISSIONER FOR PATENTS Box PCT Washington, D.C. 20231

FIRST NAMED APPLICANT ATTY. DOCKET NO.

|          | 09/701831                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | BOUTILLIER            | J                 | 2988-661                           |  |  |
|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------------|------------------------------------|--|--|
|          | PENNIE & EDMONDS                                                                                                                                            | ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       |                   | MERNATIONAL APPLICATION NO.        |  |  |
|          | 1155 AVENUE OF THE AMERIC                                                                                                                                   | CAS :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | *                     | 1                 | DCT/FD00/04070                     |  |  |
|          | NEW YORK, NY 10036 2711                                                                                                                                     | ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       |                   | PCT/FR99/01272                     |  |  |
|          |                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       | L                 | ILING DATE PRIORITY DATE           |  |  |
|          |                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                   | MAY 99 JAN 2001 98                 |  |  |
|          | NOTIFICATION OF 1                                                                                                                                           | MICCINIC DECIM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | DELETING VANC         | DATE MAILED       | 29 JAN ZUUI                        |  |  |
|          | NOTIFICATION OF 3                                                                                                                                           | TES DESIGNATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | D/ELECTED OFF         | K 35 U.S.C. 3'    | 71 IN THE UNITED                   |  |  |
|          | <ol> <li>The following items have been s</li> </ol>                                                                                                         | ubmitted by the app                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | licant or the IB to t | he United State   | s Patent and Trademark Office as   |  |  |
|          | □ a Designated Office                                                                                                                                       | (37 CFR 1.494),                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                   | The same readilities as            |  |  |
|          | an Elected Office (2                                                                                                                                        | 37 CFR 1.495):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                       |                   |                                    |  |  |
|          | U.S. Basic National Fee.                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                     |                   |                                    |  |  |
|          | Copy of the international app                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                   |                                    |  |  |
|          | ⊠ a non-English langu<br>□ English.                                                                                                                         | age.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                       |                   |                                    |  |  |
|          | Translation of the internation                                                                                                                              | al application into                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | English               |                   |                                    |  |  |
|          | Oath or Declaration of inven                                                                                                                                | tors(s) for DO/EO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Eugusu.<br>TIS        |                   |                                    |  |  |
|          | Copy of Article 19 amendme                                                                                                                                  | ents.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 05.                   |                   |                                    |  |  |
|          | ☐ Translation of Article 19 am                                                                                                                              | endments into Engl                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ish.                  |                   |                                    |  |  |
|          | The International Preliminar                                                                                                                                | y Examination Rep                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ort in English and it | s Annexes, if a   | ny.                                |  |  |
|          | Translation of Annexes to the                                                                                                                               | International Prel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iminary Examinatio    | n Report into E   | inglish.                           |  |  |
|          | Preliminary amendment(s) f                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                   | ·                                  |  |  |
|          |                                                                                                                                                             | ment(s) filed0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | DEC. 2000 an          | nd                | ·                                  |  |  |
|          | Power of Attorney and/or Cl                                                                                                                                 | ange of Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                   |                                    |  |  |
|          | Substitute specification filed                                                                                                                              | lange of Address.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       |                   |                                    |  |  |
|          | ☐ Verified Statement Claiming                                                                                                                               | Small Entity Status                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <del></del> •         |                   |                                    |  |  |
|          | Priority Document.                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                   |                                    |  |  |
|          | Copy of the International Sea                                                                                                                               | rch Report 🗶 and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | copies of the refere  | nces cited there  | in.                                |  |  |
| ,        | Other: 2-306, RO101                                                                                                                                         | and the contract of the state o |                       |                   |                                    |  |  |
| a        | 2. The following items <b>MUST</b> be furnished within the period set forth below in order to complete the requirements for acceptance under 35 U.S.C. 371: |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                   |                                    |  |  |
|          | a. Translation of the application into English. Note a processing fee will be required if submitted later than the                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                   |                                    |  |  |
|          | appropriate 20 or 30 months                                                                                                                                 | from the priority di                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ite.                  |                   |                                    |  |  |
|          | ☐ The current transle                                                                                                                                       | ation is defective                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | for the reasons in    | dicated on the    | attached Notice of Defective       |  |  |
|          | Translation.                                                                                                                                                | or the translation of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                       |                   |                                    |  |  |
|          | 30 months from the priority of                                                                                                                              | ate (37 CFR 1.492                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | the application and   | or the Annexe     | s later than the appropriate 20 or |  |  |
|          | c. Oath or declaration of the                                                                                                                               | inventors, in comp                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iance with 37 CFR     | 1.497(a) and (l   | ), identifying the application by  |  |  |
|          | the international application is                                                                                                                            | iumber and internat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ional filing date.    |                   |                                    |  |  |
|          | on the attached PCT                                                                                                                                         | declaration does no                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | t comply with 37 C    | FR 1.497(a) and   | d (b) for the reasons indicated    |  |  |
|          | d. Surcharge for providing the                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | n later than the ann  |                   | 20                                 |  |  |
|          | (37 CIR 1.432(c)).                                                                                                                                          | out of accidiance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | u later than the app  | topriate 20 or 3  | o months from the priority date    |  |  |
| 3        | Additional claim fees of \$                                                                                                                                 | as a 🗌 lar                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ge entity 🗌 small e   | ntity, including  | any required multiple dependent    |  |  |
| C.       | laim fee, are required. Applicant m                                                                                                                         | ust submit the addi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ional claim fees or   | cancel the addi   | tional claims for which fees are   |  |  |
|          | ue. See attached PTO-875.                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                   |                                    |  |  |
| A        | LL OF THE ITEMS SET FORTI                                                                                                                                   | I IN 2(a)-2(d) AN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | D 3 ABOVE MUST        | BE SUBMIT         | TED WITHIN ONE MONTH               |  |  |
| r        | KOM THE DATE OF THIS NOT                                                                                                                                    | ICE OR BY 1. 121                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | OR X 31 MONT          | HS FROM TO        | TO DDIADITED BATTERAN              |  |  |
| Ā        | HE APPLICATION, WHICHEVE<br>BANDONMENT.                                                                                                                     | EK IS LATER. F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ALLURE TO PRO         | PERLY RESP        | OND WILL RESULT IN                 |  |  |
|          |                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | *                     |                   |                                    |  |  |
| T        | he time period set above may be ext<br>FR 1.136(a).                                                                                                         | ended by filing a p                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | etition and fee for e | xtension of time  | e under the provisions of 37       |  |  |
| •        | TR 1.130(a).                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | *                     |                   | 4                                  |  |  |
| 4.       | Translation of the Annexes MUST                                                                                                                             | be submitted no la                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ter that the time per | riod set above o  | or the annexes will be cancelled   |  |  |
| 14       | ore brocessing tee will be required t                                                                                                                       | I submitted later th                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | an 30 months from     | the priority data | e                                  |  |  |
| ٦.<br>40 | $\Box$ The Article 19 amendments are $94(d)$ or 30 (37 CFR 1.495(d)) mon                                                                                    | cancelled since a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ranslation was not p  | provided by the   | appropriate 20 (37 CFR.            |  |  |
|          |                                                                                                                                                             | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       | ₹.                |                                    |  |  |
| Α        | pplicant is reminded that any commi                                                                                                                         | inication to the Un                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ted States Patent an  | d Trademark C     | Office must be mailed to the       |  |  |
| ac       | idiess given in the heading and inch                                                                                                                        | de the U.S. applica                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ition no. shown abo   | ve. (37 CFR 1.    | .5)                                |  |  |
|          | A copy of this notice                                                                                                                                       | MUST be I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | returned with         | h this res        | ponse.                             |  |  |
|          | nclosed:                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       | 4                 | •                                  |  |  |
| F        | ] PCT/DO/EO/917<br>] PTO-875                                                                                                                                | ☐ Notice of Def                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ective Translation    | Ch-               | iotina C. Washington               |  |  |
| F        | ORM PCT/DO/EO/905 (December                                                                                                                                 | 1997)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                       |                   | istine S. Washington               |  |  |
|          | (December                                                                                                                                                   | )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       | i etebuoi         | ne: 703-305-3752                   |  |  |



UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office Address: ASSISTANT COMMISSIONER FOR PATENTS Washington, D.C. 20231

| U.S. APPLICATION NO.                                                       | FIRST NAMED APPLICANT |                 | ATTY. DOCKET NO. |  |
|----------------------------------------------------------------------------|-----------------------|-----------------|------------------|--|
| . 09/701831                                                                | BOUTILLIER            | J               | 2988-661         |  |
| PENNIE & EDMONDS<br>1155 AVENUE OF THE AMERICAS<br>NEW YORK, NY 10036 2711 |                       | PCT/FR99/01272  |                  |  |
|                                                                            |                       | LA. FILING DATE | PRIORITY DATE    |  |
|                                                                            |                       | 31 MAY 99       | 03 JUN 98        |  |

NOTIFICATION OF A DEFECTIVE OATH OR DECLARATION

This application fails to contain an oath or declaration acceptable under 35 U.S.C. 371 (c)(4) for entry into the national stage in the United States of America. The period within which to correct these requirements and avoid abandonment is set in the accompanying Office action.

A new oath or declaration, identifying this application by the international application number and international filing date is

| required. The oath or declaration does not comply with 37 CFR 1.497(a) and (b) in that it:                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ol> <li>is not executed in accordance with either 37 CFR 1.66 or 37 CFR 1.68.</li> <li>does not identify the specification to which it is directed.</li> <li>does not identify the inventor(s).</li> <li>does not identify the citizenship of each inventor.</li> <li>does not state the person making the oath or declaration believes the named inventor or inventors to be the original and first inventor or inventors of the subject matter which is claimed and for which a patent is sought.</li> </ol> |
| FAILURE TO SUBMIT AN OATH OR DECLARATION IN COMPLIANCE WITH 37 CFR 1.497(a) AND (b) WITH THE TIME PERIOD SET WILL RESULT IN FAILURE TO ENTER THE NATIONAL STAGE AND THE ABANDONMENT OF THE APPLICATION.                                                                                                                                                                                                                                                                                                         |
| Additionally, the oath or declaration does not comply with 37 CFR 1.63 in that it:                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 1. does not identify the city and state or city and foreign country of residence or each inventor.                                                                                                                                                                                                                                                                                                                                                                                                              |
| 2. does not state that the person making the oath or declaration:                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <ul> <li>a. has reviewed and understands the contents of the specification, including the claims, as amended by any amendment specifically referred to in the oath or declaration.</li> </ul>                                                                                                                                                                                                                                                                                                                   |
| <ul> <li>b. acknowledges the duty to disclose information which is material to patentability as<br/>defined in 37 CFR 1.56.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                          |
| does not identify the foreign application for patent or inventor's certificate on which priority is claimed pursuant to 37 CFR 1.55, and any foreign application having a filing date before that of the application on which priority is claimed, by specifying the application serial number, country, day, month, and year of its filing.                                                                                                                                                                    |
| does not state that the person making the oath or declaration acknowledges the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and filing date of the continuation in part application which discloses and claims subject matter in addition to that disclosed in the prior application (37 CFR 1.63(d)).                                                                                     |
| Christine S. Washington                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |

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FORM PCT/DO/EO/917 (September 1996)